U.S. Department of Labor Office of Labor-Management Standards Washington, DC 20210

## FORM LM-30 LABOR ORGANIZATION OFFICER AND EMPLOYEE REPORT

Form approved Office of Management and Budget No. 1215-0188 Expires 11-30-2006

This report is mandatory under P.L. 86-257, as amended. Failure to comply may result in criminal prosecution, fines, or civil penalties as provided by 29 U.S.C 439 or 440.

F	or Official Usa Only
	(SA1622705)
E	Q <sub>MS</sub> (RE

1. File Number U - 10338

READ THE INSTRUCTIONS CAREFULLY BEFORE PREPARING THIS REPORT.

2. Fiscal Year Covered From

01 01 2004 Through: 12 31 2004

3. Name and address of person filing.		4. Name, file number, and address of labor organization.		
Name	DANO, JR DANTE	Name	Sheet Metal Workers Local Union #137/ AFL-CIO	
		Labor	Organization File Number 003-727	
P.O. Bo	x, Bldg., Room No., if any	P.O. B	Box, Building and Room Number, if any	
Street	21-42 44th Drive	Street	21-42 44th Drive	
City	Long Island City	City	Long Island City	
State	New York ZIP Code + 4 11101-470	State	New York ZIP Code + 4 11101-470	
5. Positio	n in labor organization.			
monetar	an interest in, engaged in transactions (including loans) with, or y value from an employer whose employees your organizat	ion repres	ncome or other economic benefit of sents or is active y seeking to represent.	
6. Name	and address of Employer (including trade name, if any).	7.a. Nati	ture of Interest, Transaction, or Income.	
Name				
Trade N	lame, if any:			
P.O. Bo	ox, Bldg., Room No., if any			
Ctront		7.b. Am	iount.	
Street				
City				
State	ZIP Code + 4			
	Sig	nature	·	
euhmit	gnatura and verification. The undersigned declares, under penalty of the information contained in any accompanisigned's knowledge and belief, true correct, and complete. (See the se	vina docum	nents), has been examined by the signatory and is, to the best of the	

Telephone Number

Name of Person Filing Dans, TR. Dank	File Number U-			
B. Held an interest in or derived income or economic benefit with monetary value from a business (1) a substantial part of which consists of buying from, selling or leasing to, or otherwise dealing with the business of an employer whose employees your labor organization represents or is actively seeking to represent, or (2) any part of which consists of buying from or selling or leasing directly or indirectly to, or otherwise dealing with your labor organization or with a trust in which your labor organization is interested.				
8. Name and address of Business (including trade name, if any).	9. Business deals with:			
Name C19AA  Trade Name, if any:  P.O. Box, Bldg., Room No., if any  Street  City HAPT FORD  State C1 ZIP Code + 4	a. Labor Organization  b. Trust c. Employer			
	11.a. Nature of such dealing.			
10. If 9.b. or 9.c. is checked give trust or employer's name.  Name  Sheet Metal Workers' Local Union #137  Trade Name, if any:	DISCUSSING TRANSPER OF			
P.O. Box, Bldg., Room No., if any				
Street 21-42 44th Drive  City Long Island City	11.b. Approximate dollar value of such dealing.     12.a. Nature of interest he d or income received.			
State New York ZIP Code + 4 11101-4701	Business / Golf			

C. Received from any employer (ot or from any labor relations consultant to	her than an employer covered o an employer any payment of m	under parts A and B above) oney or other thing of value.
13.a Name and address of Employer or I (including trade name, if any).	abor Relations Consultant	14.a. Nature of payment
Name		
Trade Name, if any:		
P.O. Box, Bldç., Room No., if any		
Street		· •
City		
State	ZIP Code + 4	
13.b Is the Business an Employer	or Consultant ?	14.b. Amount of payment.

12.b. Amount.

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Name of Person Filing DANO, JR. DANTE	File Number U-
B. Held an interest in or derived income or economic benefit with monetary values substantial part of which consists of buying from, selling or leasing to, or otherwork of an employer whose employees your labor organization represents or is active (2) any part of which consists of buying from or selling or leasing directly or indicating with your labor organization or with a trust in which your labor organization.	wise dealing with the business vely seeking to represent, or irectly to, or otherwise
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Name   NVESCO  Trade Name, if any:  P.O. Box, Bldg., Room No., if any	a. Labor Organization  ✓ b. Trust
Street	c. Employer
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State 4. ZIP Code + 4	
10. If 9.b. or 9.c. is checked give trust or employer's name.  Name  Sheet Metal Workers' Local Union #137  Frade Name, if any:  P.O. Box, Bldg., Room No., if any	11.a. Nature of such dealing.  DUSCUSSING TRANSFOR OF ANNUMY  FUND
Street 21-42 44th Drive  City Long Island City  State New York ZIP Code + 4 11101-4701	11.b. Approximate dollar value of such dealing.  12.a. Nature of interest ne.d or income received.  BUSINESS GOIF
	12.b. Amount. /00 · 60
C. Received from any employer (other than an employer covered unde or from any labor relations consultant to an employer any payment of money	or parts A and B above) or other thing of value.
13.a Name and address of Employer or Labor Relations Consultant (including trade name, if any).	14.a. Nature of payment
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Trade Name, if any:	
P.O. Box, Bldg., Room No., if any	
Street	
City	

14.b. Amount of payment.

ZIP Coce + 4

or Consultant

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13.b Is the Business an Employer

State

Name of Person Filing DANO, JR . DANNE	File Number U-
B. Held an interest in or derived income or economic benefit with monetary val substantial part of which consists of buying from, selling or leasing to, or other of an employer whose employees your labor organization represents or is activity) any part of which consists of buying from or selling or leasing directly or included ing with your labor organization or with a trust in which your labor organization.	wise dealing with the business vely seeking to represent, or lirectly to, or otherwise
8. Name and address of Business (including trade name, if any).	9. Business deals with:
Name AM. A GAMARED BARK  Trade Name, If any:	a. Labor Organization
P.O. Box, Bldg., Room No., if any Street [ -   S UNION 5 G	b. Trust c. Employer
City Men You(C  State M ZIP Code + 4 ( 000 3	
10. If 9.b. or 9.c. is checked give trust or employer's name.  Name  Sheet Metal Workers' Local Union #137  Trade Name, if any:	11.a. Nature of such dealing.
P.O. Box, Bldg., Room No., if any	
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City Long Island City  State New York ZIP Code + 4 11101-4701	12.a. Nature of interest held or income received.  BUSIACSS / GOLF
	12.b. Amount. 100 · 00
C. Received from any employer (other than an employer covered unde or from any labor relations consultant to an employer any payment of money	er parts A and B above) or other thing of value.
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14.b. Amount of payment.

13.b Is the Business an Employer

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ZIP Code + 4

or Consultant

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Name of Person Filing DANO, JR. DANTE	File Number U-		
B. Held an interest in or derived income or economic benefit with monetary val substantial part of which consists of buying from, selling or leasing to, or other of an employer whose employees your labor organization represents or is active. (2) any part of which consists of buying from or selling or leasing directly or indicating with your labor organization or with a trust in which your labor organization.	vise dealing with the business rely seeking to represent, or irectly to, or otherwise		
Name and address of Business (including trade name, if any).	9. Business deals with:		
Name SONAK, UPTON	a. Labor Organization		
Trade Name, if any:	b. Trust		
P.O. Box, Bldg., Room No., if any	c. Employer		
Street			
State N.V. ZIP Code + 4 [DO19]			
State P.V. ZIP Code + 4 [DO19			
10. If 9.b. or 9.c. is checked give trust or employer's name.	11.a. Nature of such dealing.		
Name Sheet Metal Workers' Local Union #137	TRUSTEES MEETING		
Trade Name, if any:			
P.O. Box, Bldg., Room No., if any			
Street 21-42 44th Drive	11.b. Approximate dollar value of such dealing.		
City Long Island City	12.a. Nature of interest held or income received.		
State New York ZIP Code + 4 11101-4701	BUSINESS WACH		
	12.b. Amount. 35. 20		
C. Received from any employer (other than an employer covered under parts A and B above) or from any labor relations consultant to an employer any payment of money or other thing of value.			
13.a. Name and address of Employer or Labor Relations Consultant (including trade name, if any).	14.a. Nature of payment		

13.a. Name and address of Employer or Labor Relations Consultant (including trade name, if any).

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Trade Name, if any:

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13.b ts the Business an Employer

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13.a. Name and address of Employer or Labor Relations Consultant (including trade name, if any).

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Street

City

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ZIP Code + 4

13 b Is the Business an Employer

or Consultant

14 b. Amount of payment